

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO.	FILING DATE				
						APPLICANT(S)		09/914471			
CLAIMS						*	*	*			
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
IND.	DEP.	IND.	DEP.	IND.	DEP.						
1	/					51					
2	/					52					
3	/					53					
4	/	31				54					
5		31				55					
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49						99					
50						100					
TAL	7					TOTAL IND.					
TAL	14					TOTAL DEP.					
TAL	14					TOTAL CLAIMS					
CLMS											

F-1380 (3-78) \*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS U.S. DEPARTMENT OF COMMERCE  
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